FORM D

UNITED STATES TIES AND EXCHANGE COMMISSION

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549



FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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03033400	76 105 rs .00

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Prefix		Serial
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) Series A Preferred Stock offering	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) DLOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	SEP 2 6 20117
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) LNNi.com, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 1011 San Jacinto Blvd., Suite 405, Austin, TX 78701	Telephone Number (Including Area Code) (512) 320-1525
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Legislative tracking services via the Internet	
Type of Business Organization Corporation Imited partnership, already formed other (please limited partnership, to be formed	specify) limited liability company
Actual or Estimated Date of Incorporation or Organization: Month Year 1 0 9 8	

GENERAL INSTRUCTIONS

FINANCIAL

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and r	nanaging partner o	of partnership issuers.	,	0 01	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Khazen, Haidar	if individual)				
Business or Residence Add 1011 San Jacinto Blvd., Sui			ode)		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, US.Net Investment Corpora					
Business or Residence Add Chaccar Building, 3rd Floor	•		ode)		
Check Box(es) that Apply:		Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, Krumbhaar, George	if individual)				
Business or Residence Add 3732 Windom Place, N.W.,	`		ode)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Thomas, Arnold	if individual)				
Business or Residence Addi 1011 San Jacinto Blvd., Sui	,		ode)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Bentzin, Ben	if individual)				
Business or Residence Addi 4603 Island Cove, Austin, T		Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, Kilcrease, Laura	if individual)				
Business or Residence Additional North Capital of Texas					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Breedlove, William	if individual)				
Business or Residence Addr 13355 Noel Road, Suite 165	,		ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, Triton Venture Partners, L.I					
Business or Residence Address of Texas	ess (Number and				
ooor moran capital or rexa			itional copies of this sheet	, as necessary.)	

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		A. BASIC IDEN	TIFICATION DATA	No. of the second	
2. Enter the information re	quested for the fol	llowing:			and have been a few and the second se
• Each promoter of	the issuer, if the is	suer has been organized	within the past five years;		
 Each beneficial or securities of the is: 		power to vote or dispose	, or direct the vote or disp	position of, 10%	or more of a class of equit
• Each executive of	ficer and director of	of corporate issuers and o	f corporate general and ma	naging partners of	f partnership issuers; and
Each general and a	managing partner	of partnership issuers.			
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first TABACO Investment Corp		A)			
Business or Residence Add	ress (Number and	Street, City, State, Zip C			
S. Nassar and Sons (London Check Box(es) that Apply:		ury House, London Wall, Beneficial Owner	London EC2M SRR, U.K. Executive Officer	., Attn: Bassam A	A. Nassar General and/or
check Box(es) that Apply.	Fromoter	Beneficial Owner	Executive Officer	☑ Director	Managing Partner
Full Name (Last name first Touma, Walid					
Business or Residence Add Chaccar Building, 3rd Floo			ode)		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, Otter-Nickerson, Betty	, if individual)				
Business or Residence Add 1011 San Jacinto Blvd., Sui	•	• • • • • • •	ode)		
Check Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		,		
Business or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:		☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)		٧		
Business or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING

														Yes	No
1.	Has the iss	uer sold,	or does t	he issuer	intend to	sell, to n	on-accre	dited inve	stors in t	his offeri	ng?				\boxtimes
					Answer a	ilso in Ap	pendix, (Column 2	, if filing	under U	LOE				
2.	What is the	e minimu	m investr	ment that	will be a	ccepted f	rom any	individua	1?		•••••			\$ <u>-0-</u>	=
_	_						_		v					Yes	No
3.	Does the o		-		-	-									
4.	Enter the i														
	person or a														
	than five (a dealer only		is to be l	isted are	associate	d person	s of such	a broker	or deale	r, you m	ay set fo	rth the ir	formation	for that	broker or
Full	Name (Las		ret if ind	lividual)										 	
1 411	Traine (Las	t name n	150, 11 1110	ividual)											
Bus	iness or Res	sidence A	ddress (1	Number a	nd Street	, City, St	ate, Zip C	Code)				••••			
Nar	ne of Assoc	iated Bro	ker or De	ealer										*	
<u></u>				<u> </u>			12 1. 15			—.,	.				
Stat	tes in Which														All States
	(Check "Al													····· [] *	III States
	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
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	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full	Name (Las	t name fi	rst, if ind	ividual)											
Bus	iness or Res	idence A	ddress (1	Number a	nd Street	, City, Sta	ate, Zip C	Code)	•						
Nan	ne of Assoc	iated Bro	ker or De	ealer											
Stat	es in Which	Person I	isted Ha	s Solicite	d or Inter	nds to So	licit Purc	hasers		·····					
	(Check "Al	1 States"	or check	individua	ıl States)									🔲 A	All States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]		[MN]				
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
Full	Name (Las														
Bus	iness or Res	idence A	.ddress (N	Number a:	nd Street	, City, Sta	ate, Zip C	code)							
Nan	ne of Associ	iated Bro	ker or De	aler					i. V						
State	es in Which	Person I	isted Ha	s Solicite	d or Inter	nds to So	licit Purc	hasers							
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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\preceq\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Type of Security Offering Price Already Sold -0--0-Equity 242,648 ☐ Common ☐ Preferred Convertible Securities (including warrants) \$ Partnership Interests \$ \$ Other (Specify) -0-242,648 122,108 Total\$ Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number of Dollar Amount Investors of Purchases 122,108 Accredited Investors . Non-accredited Investors \$ -0-Total (for filings under Rule 504 only) Not Applicable N/A N/A Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Ouestion 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 Not Applicable N/A N/A Regulation A Not Applicable N/A N/A Rule 504 Not Applicable N/A \$ N/A Total Not Applicable \$ N/A N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to further contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$ Printing and Engraving Costs -0-\$ Legal Fees \$ 10,000

5 of 9

\$

\$

-0-

-0-

-0-

1,000

11.000

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)

other costs) miscellaneous, state filing fees

Total

Other Expenses (identify) (filing fees, wiring fees,

	The state of the s		The second second	erecy vertice	The state of the s	interior alle	and an example	
		NUMBER OF INVESTORS, EXPEN	Security Control Edition	COLUMN TWO IS NOT	USE OF PROC	EED	5	THE THE RESERVE
1	Enter the difference between the aggregatesism 1 and total expenses furnished in its the "adjusted gross proceeds to the issue	response to Part C - Question 4.a. This						
	is the adjusted gross proceeds to the issue	1.				\$		231,648
	Indicate below the amount of the adjusted used for each of the purposes shown. If the estimate and check the box to the left of the equal the adjusted gross proceeds to the it 4.b above.	e amount for any purpose is not known, he estimate. The total of the payments l	furnish isted m Questic	an ust ons	ents to Officers,			
	4				ors & Affiliates	I	ayme	ents to Others
	Salaries and Fees			\$	-0-	\boxtimes	\$	39,000
	Purchase of Deal Estate		······ —	\$	-0-		\$	-0-
	Purchase, rental or leasing and installation			\$	-0-		\$	-0-
	Construction or leasing of plant buildings	and facilities		\$	-0-		\$	-0-
	Acquisition of other businesses (including involved in this offering that may be used assets or securities of another issuer pursuance.	g the value of securities sed in exchange for the		\$	-0-		\$	-0-
	Panayment of indehtedness		\$	-0-		\$ 	-0-	
	XX7-ad-lan-a-mit-1		¢.	-0-	◡▧	\$ — \$	165,648	
	***************************************	expenses)		Φ.	-0-		\$ — \$	27,000
	Calamin Tatala		<u>'</u>	Ψ. \$	-0-		* — \$	231,648
	Total Payments Listed (column t	otals added)		Ψ.	<u> </u>	•	 1,648	
								
		D. FEDERAL SIGNATURE	事業生	ļ, A		11		
ollo	issuer has duly caused this notice to be swing signature constitutes an undertaking staff, the information furnished by the issues.	by the issuer to furnish to the U.S. Secu	ırities a	nd E	Exchange Commi	ssion	i, upoi	
ssue	r (Print or Type)	Signature		D	ate			
LNN	i.com, Inc.	Bet Hr. Wicker		S	eptember 23, 200	3		
Vam	e of Signer (Print or Type)	Title of Signer (Print or Type)						
Betty	Otter-Nickerson	Chief Executive Officer						
	,	<u> </u>						
	:							
	•							
	1	ATTENTION						

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	•				
1000 14/10	PART OF THE PROPERTY OF THE PR	E. STATE SIGNATURE		wit :	Haller Haller
1	Is any nexty described in 17 CED 220	252(a) (d) (a) on (f) measurely symbols to once	of the discoverification provisions	Yes	No
1.	of such rule?	252(c), (d), (e) or (f) presently subject to any	or the disquarmeation provisions		\boxtimes
		See Appendix, Column 5, for state resp	ponse.		
2.	The undersigned issuer hereby underta (17 CFR 239.500) at such times as req	akes to furnish to any state administrator of a uired by state law.	ny state in which this note is filed,	a notice	on Form D
3.	The undersigned issuer hereby underta offerees.	ikes to furnish to the state administrators, upo	n written request, information furnis	shed by th	ne issuer to
4.	Offering Exemption (ULOE) of the s	the issuer is familiar with the conditions that state in which this notice is filed and under ng that these conditions have been satisfied.			
	e issuer has read this notification and dersigned duly authorized person.	knows the contents to be true and has duly	caused this notice to be signed of	on its bel	nalf by the
Īss	uer (Print or Type)	Signature	Date		
LN	Ni.com, Inc.	Setz Other Nickus	_ September 23, 2003		
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)			
Be	tty Otter-Nickerson	Chief Executive Officer			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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	non-ac	to sell to credited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)				
State	Yes	No	Equity Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA							-		
CO					٠				
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•	non-accinvestor	to sell to credited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)				ification ate ULOE attach ation of granted) - Item 1)
State	Yes	No	Equity Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
ND					•				
OH									
OK									
OR									
PA									
RI									
SC									
SD			i						
TN									
TX		XX	Preferred Stock - \$242,648	4	Preferred Stock - \$122,108	-0-	\$0		XX
UT									
VT									
VA									
WA									
WV									
WI									
WY									
PR									